SEC 1972 Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB (6-02)control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per response 1

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)

Filing Under (Check box(es) that apply):

[] Rule 504 [] Rule 505 [] Rule 506 [] Section 4(6) [] ULOTENANCIAL

Type of Filing: [X] New Filing [] Amendment

A. BASIC IDENTIFICATION DATA



1. Enter the information requested about the issuer

Name of Issuer ([] check if this is an amendment and name has changed, and indiciate change.)

Address of Executive Offices (Including Area Code)

(Number and Street, City, State, Zip Code)

Telephone Number

1780 North Hwy 38 Brigham City, Utah 84302

Telephone Number Address of Principal Business Operations (Number and Street, City, State, Zip Code) (Including Area Code)

(if different from Executive Offices)

Brief Description of Business

http://www.sec.gov/divisions/corpfin/forms/formd.htm

7/12/2002

Type of Business Organiz	ation
[] corporation	[] limited partnership, already formed $[X]$ other (please specify):
[] business trust	[] limited partnership, to be formed Limited Liability Company
	Month Year
Actual or Estimated Date	of Incorporation or Organization: [0]1] [0]2} [] Actual [/] Estimated
Jurisdiction of Incorporation	n or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [U] [7]
GENERAL INSTRUCTION	IS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

•	Each general and managing partner of partne	rship issuers

Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [X	General and/or Managing Partner
Full Name (Last name	e first, if individual)			
Jerhoff,	Stephen J.			
•	ee Address (Number and Street,	City, State, Zip Cod	ie)	
1780 North	Hwy 38 Brigh	am City Ut	ah 84302)
	[] Promoter [] Beneficial Owner	•		General and/or Managing Partner
Full Name (Last name	e first, if individual)			
Business or Residence	ee Address (Number and Street,	City, State, Zip Cod	le)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	e first, if individual)			
Business or Residence	ce Address (Number and Street,	City, State, Zip Cod	le)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	e first, if individual)			
Business or Residence	ce Address (Number and Street,	City, State, Zip Cod	le)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	e first, if individual)			
Business or Residence	ce Address (Number and Street,	City, State, Zip Cod	le)	
Check Box(es) that	[] Promoter [] Beneficial	[] Executive	[] Director []	General and/or

Apply:		Owner	•	Offic	cer			Manag Partne	
Full Name (Last name	e first, if in	dividual)							100 Marie 1
Business or Residence	ce Address	s (Number and	Street, C	ity, State	e, Zip Co	de)			
Check Box(es) that Apply:	[] Pror	moter [] Benefi Owner		[]Exe		[][Director [] Genera Manag Partne	ing
Full Name (Last name	e first, if in	dividual)				in the Consession of the Conse	:	·	tenting (**
Business or Residence	ce Addres	s (Number and	Street, C	City, State	e, Zip Co	de)			
(Use bl	ank shee	t, or copy and	use add	itional c	opies of	this she	eet, as n	ecessary	·.)
		B. INFOR	MATIO	N ABOU	Γ OFFE	RING			
Has the issuer soloffering?		the issuer inten					1	Ye [X	
2. What is the minim		• •			_			\$ <u>.</u> 2	1000,00
3. Does the offering	permit join	t ownership of a	a single i	unit?				Ye: [X	
4. Enter the informat directly or indirectly, connection with sales person or agent of a the name of the brok persons of such a bronly.	any comm s of securi broker or er or deal	nission or similar ties in the offeri dealer registere er. If more than	r remune ng. If a p d with th five (5) p	eration fo person to ne SEC a persons t	r solicita be listed nd/or wit o be liste	tion of pu I is an as h a state ed are as	rchasers sociated or states sociated	s in	
Full Name (Last nam	e first, if in	dividual)			,				
Business or Residen	ce Addres	s (Number and	Street, C	City, State	e, Zip Co	de)			
Name of Associated	Broker or	Dealer							
States in Which Pers	on Listed	Has Solicited or	Intends	to Solicit	Purcha	sers			
(Check "All State	s" or che	eck individual	States)			[] All S	tates
[AL] [AK] [AZ]	[AR]	[CA] [CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [IN] [IA] [MT] [NE] [NV]	[KS] [NH]	[KY] [LA] [NJ] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI] [SC] [SD]		[דא] [עדן	[[[[VA]	[WA]	[////]	[W]	[WY]	[PR]

Form	D											Page 5 of 10
Full Na	ame (La	st name	first, if i	ndividua	1)							
Busine	ess or R	esidenc	e Addres	ss (Num	ber and	Street, C	City, State	e, Zip Co	de)			
Name	of Asso	ciated B	roker or	Dealer								
		_				_		t Purchas	sers			
(Che	ck "All	States	" or ch	eck inc	lividual	States)			[] All S	states
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]		[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN] 	[TX]	[UT]	[VT]	[VA]	[W A]	[WV]	[W] ([W Y]	[PR]
Full Na	ame (La	st name	first, if i	ndividua	ı l)					:		
Rueine	es or P	esidenc	a Addres	ee (Num	her and	Street C	ity Stat	e, Zip Co	ide)			,
Dasine	233 OF TV	esideno	o Augre		Del alla	Oli eet, C	oity, Otat	e, בוף כ כ	uc) .			
Name	of Asso	ciated B	roker or	Dealer							-	
States	in Whic	h Perso	n Listed	Has So	licited or	Intends	to Solici	t Purchas	sers			
_		_				States				ſ] All S	states
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	, [DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[ТХ]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]	[PR]
	(Use bla	nk she	et, or co	py and	use add	itional d	opies of	this sh	eet, as n	ecessar	y.)
-	C. (OFFERI	NG PRI	CE, NUI	MBER O	FINVES	STORS,	EXPENS	ES AND	USE OF	PROCE	EEDS
and the fithe to	ie total a transacti	mount a ion is an elow the	already s exchan amoun	sold. Ent ge offer	ter "0" if ing, ched	answer i	s "none" ox " and	is offering or "zero. indicate i change	11	cn.auau		
Т	ype of S	Security								gregate ring Price		ınt Already Sold
	Debt					•••••			\$		_ \$	
Ε	equity						••••••		\$		_ \$	
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	(#)							_				

Total	\$500000.00	D\$_
Answer also in Appendix, Column 3, if filing under ULOE.		· · · · · · · · · · · · · · · · · · ·
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors		\$
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Type of offering Rule 505		\$
Regulation A		\$
Rule 504		\$ \$
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees]\$
Printing and Engraving Costs]\$
Legal Fees	_	1\$ 5000.00
Accounting Fees	-	1\$ 2000.00
Engineering Fees]\$
Sales Commissions (specify finders' fees separately)]\$
Other Expenses (identify)		1\$
Total		1\$ 7000.00
		1+_1000.00
b. Enter the difference between the aggregate offering price given in resp Question 1 and total expenses furnished in response to Part C - Question difference is the "adjusted gross proceeds to the issuer."		\$ <u>493000</u> , £
5. Indicate below the amount of the adjusted gross proceeds to the issue proposed to be used for each of the purposes shown. If the amount for a purpose is not known, furnish an estimate and check the box to the left o estimate. The total of the payments listed must equal the adjusted gross	ny f the	

to the issuer set forth in response to Part C - Question	4.D above.	Payments to
		Officers, Payments
		Directors, & To Affiliates Others
Salaries and fees		[] \$\$
Purchase of real estate		
Purchase, rental or leasing and installation of mac and equipment		\$\$ [] [] \$\$
Construction or leasing of plant buildings and facili	ties	
Acquisition of other businesses (including the valu securities involved in this offering that may be use exchange for the assets or securities of another is pursuant to a merger)	ed in ssuer	[] [] \$
Repayment of indebtedness		[] [] \$\$
Working capital		[] [] \$
Other (specify): Comodity Pool Tradi	nq	[] [] [] [] [] [] [] [] [] [] [] [] [] [
		\$\$
Column Totals		[] W \$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$
Total Payments Listed (column totals added)		[7\$ 493000.00
D. FEDERA	L SIGNATURE	
The issuer has duly caused this notice to be signed by the filed under Rule 505, the following signature constitutes Securities and Exchange Commission, upon written required any non-accredited investor pursuant to paragraph (b)(2)	an undertaking by the issu quest of its staff, the informa	er to furnish to the U.S.
Issuer (Print or Type)	Signature	Date
The Opportunity Fund, LLC	Flesh Mark	2/ 7-25-02
Name of Signer (Print or Type)	Title of Signer (Print or Ty	pe)
Stephen J. Jerhoff	Managing Meml	nex
ATT	ENTION	
Intentional misstatements or omissions of fa	ct constitute federal crim C. 1001.)	inal violations. (See 18